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NEW MEXICO ENVIRONMENT DEPARTMENT

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James C. Kenney
Cabinet Secretary

Jennifer J. Pruett
Deputy Secretary

Certified Mail – Return Receipt Requested

August 29, 2019

Mr. Scott Berry, City Manager
City of Raton
P.O. Box 910
224 Savage Ave.
Raton, New Mexico 87740

Re: Raton Water Treatment Plant; Minor Industrial; SIC 4941; NPDES Compliance Evaluation Inspection; NPDES #NM0029891; August 20, 2019

Dear Mr. Berry:

Enclosed please find a copy of the report and check list for the referenced inspection that the New Mexico Environment Department (NMED) conducted at your facility on behalf of the U.S. Environmental Protection Agency (USEPA). This inspection report will be sent to the USEPA in Dallas for their review. These inspections are used by USEPA to determine compliance with the National Pollutant Discharge Elimination System (NPDES) permitting program in accordance with requirements of the federal Clean Water Act.

Further explanations and problems noted during this inspection are discussed on the completed form and checklist of this inspection report. Introduction, treatment scheme, and problems noted during this inspection are discussed in the "Further Explanations" section of the inspection report.

You are encouraged to review the inspection report, required to correct any problems noted during the inspection, and advised to modify your operational and/or administrative procedures, as appropriate. If you have comments on or concerns with the basis for the findings in the NMED inspection report, please contact us (see the address below) in writing within 30 days from the date of this letter. Further, you are encouraged to notify in writing both the USEPA and NMED regarding modifications and compliance schedules at the addresses below:

NPDES Enforcement Coordinator
Environmental Protection Agency,
Region 6 Water Enforcement Branch (6ECDWM)
1201 Elm Street, Suite 500
Dallas, Texas 75202

Program Manager
New Mexico Environment Department
Surface Water Quality Bureau (N2050)
Point Source Regulation Section
P.O. Box 5469
Santa Fe, New Mexico 87502

Raton Water Treatment Plant #NM0029891

August 20, 2019

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David Long (Long.David@epa.gov) is USEPA Region 6's Acting NPDES Enforcement Coordinator at the above address. If you have any questions about this inspection report, please contact Jennifer Foote at (505)827-0596 or at Jennifer.Foote@state.nm.us.

Sincerely,

/s/ Sarah Holcomb

Sarah Holcomb
Program Manager
Point Source Regulation Section
Surface Water Quality Bureau

cc: Carol Peters-Wagnon, USEPA (6ECDWM) by e-mail
David Long, USEPA (6ECDWM) by e-mail
Nancy Williams, USEPA (6ECDWA) by e-mail
Amy Andrews, USEPA (6ECDWM) by e-mail
David Esparza, USEPA (6ECDWM) by e-mail
Brent Larsen USEPA (6WDPE) by e-mail
Robert Italiano, NMED District II by e-mail
Dan Campbell, City of Raton by e-mail



Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

NPDES Compliance Inspection Report

Section A: National Data System Coding

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type
1 N 2 5 3 N M 0 0 2 9 8 9 1 11 12 1 9 0 8 2 0 17 18 C 19 S 20 2					
Remarks					
M I N O R I N D U S T R I A L					
Inspection Work Days	Facility Evaluation Rating	BI	QA	Reserved	
67 69	70 4	71 N	72 N	73 74 75	80

Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number)	Entry Time /Date 8:15A 8-20-19	Permit Effective Date 9/1/2016
Raton Water Treatment Plant – from I-25, take exit 454 and make a left turn at the stop. Follow road for about 2 miles. Turn left onto N. 1st Street, follow N. 1st Street to plant. Colfax County	Exit Time/Date 9:24A 8-20-19	Permit Expiration Date 8/31/21
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)	Other Facility Data	
Dan Campbell/General Manager/575-445-3861 warehouse 575-445-8092 filter plant 575-445-95919 Anthony Bustos/Plant Superintendent/ 575-445-959	N. 36.918267 W. -104.433844	
Name, Address of Responsible Official/Title/Phone and Fax Number	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	SIC 4941
Mr. Scott Berry/City Manager/ P.O. Box 910, 224 Savage Ave., Raton, New Mexico 87740/ 575-445-9551, fax 575-445-3398		

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

S	Permit	S	Flow Measurement	S	Operations & Maintenance	N	CSO/SSO
S	Records/Reports	S	Self-Monitoring Program	N	Sludge Handling/Disposal	N	Pollution Prevention
N	Facility Site Review	N	Compliance Schedules	N	Pretreatment	N	Multimedia
N	Effluent/Receiving Waters	S	Laboratory	N	Storm Water	N	Other:

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

No discharge has occurred this permit cycle. See attached sheets for further details.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone/Fax	Date
Jennifer Foote /s/ Jennifer Foote	NMED/SWQB 505-827-0596	8/29/19
Signature of Management QA Reviewer	Agency/Office/Phone and Fax Numbers	Date
Sarah Holcomb, Program Manager /s/ Sarah Holcomb	NMED/SWQB 505-827-2798	8/29/19

FACILITY NAME Raton WTP	DATE 8/20/19	PERMIT NO. NM0029891
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SECTION A - PERMIT VERIFICATION		
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS DETAILS: <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>No</u>)		
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
4. ALL DISCHARGES ARE PERMITTED	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
SECTION B - RECORDKEEPING AND REPORTING EVALUATION		
RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT. DETAILS: <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>No</u>)		
1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRs.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA	
a) DATES, TIME(S) AND LOCATION(S) OF SAMPLING	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	
b) NAME OF INDIVIDUAL PERFORMING SAMPLING	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	
c) ANALYTICAL METHODS AND TECHNIQUES.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	
d) RESULTS OF ANALYSES AND CALIBRATIONS.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	
e) DATES AND TIMES OF ANALYSES.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	
f) NAME OF PERSON(S) PERFORMING ANALYSES.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA	
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA	
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	
SECTION C - OPERATIONS AND MAINTENANCE		
TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED. DETAILS: <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>No</u>)		
1. TREATMENT UNITS PROPERLY OPERATED.	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
2. TREATMENT UNITS PROPERLY MAINTAINED.	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED.	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE.	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
5. ALL NEEDED TREATMENT UNITS IN SERVICE.	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED.	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED.	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	

FACILITY NAME Raton WTP	DATE 8/20/19	PERMIT NO. NM0029891
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SECTION C - OPERATIONS AND MAINTENANCE (CONT'D)	
9. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR? IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED? HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS?	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
10. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT? IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT?	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
SECTION D - SELF-MONITORING	
PERMITTEE SELF-MONITORING MEETS PERMIT REQUIREMENTS. <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>Yes</u>). DETAILS:	
1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA
3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
6. SAMPLE COLLECTION PROCEDURES ADEQUATE	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA
a) SAMPLES REFRIGERATED DURING COMPOSITING.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
b) PROPER PRESERVATION TECHNIQUES USED.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
c) CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136.3.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
7. IF MONITORING AND ANALYSES ARE PERFORMED MORE OFTEN THAN REQUIRED BY PERMIT, ARE THE RESULTS REPORTED IN PERMITTEE'S SELF-MONITORING REPORT?	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
SECTION E - FLOW MEASUREMENT	
PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS. <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>No</u>) DETAILS:	
1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED. TYPE OF DEVICE <u>estimate</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
4. CALIBRATION FREQUENCY ADEQUATE. (DATE OF LAST CALIBRATION _____) RECORDS MAINTAINED OF CALIBRATION PROCEDURES. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
5. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
6. HEAD MEASURED AT PROPER LOCATION.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
7. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
SECTION F – LABORATORY	
PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS. <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>No</u>) DETAILS:	
1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(b) FOR SLUDGES)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA

FACILITY NAME Raton WTP	DATE 8/20/19	PERMIT NO. NM0029891
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SECTION F - LABORATORY (CONT'D)	
2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA
4. QUALITY CONTROL PROCEDURES ADEQUATE.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA
5. DUPLICATE SAMPLES ARE ANALYZED. ____ % OF THE TIME.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
6. SPIKED SAMPLES ARE ANALYZED. ____ % OF THE TIME.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
7. COMMERCIAL LABORATORY USED.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
LAB NAME LAB ADDRESS PARAMETERS PERFORMED	

SECTION G - EFFLUENT/RECEIVING WATERS OBSERVATIONS. <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>NO</u>).							
OUTFALL NO.	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOAT SOL.	COLOR	OTHER
001	n/a	n/a	n/a	n/a	n/a	n/a	No discharge
RECEIVING WATER OBSERVATIONS _____ Facility stated there has been no discharge since the 70's.							

SECTION H - SLUDGE DISPOSAL	
SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS. DETAILS:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>NO</u>).
1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA
2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA
3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: _____ (e.g., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE)	

SECTION I - SAMPLING INSPECTION PROCEDURES (FURTHER EXPLANATION ATTACHED <u>NO</u>).	
1. SAMPLES OBTAINED THIS INSPECTION.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
2. TYPE OF SAMPLE OBTAINED GRAB _____ COMPOSITE SAMPLE _____ METHOD _____ FREQUENCY _____	
3. SAMPLES PRESERVED.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
4. FLOW PROPORTIONED SAMPLES OBTAINED.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
6. SAMPLE REPRESENTATIVE OF VOLUME AND MATURE OF DISCHARGE.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
7. SAMPLE SPLIT WITH PERMITTEE.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT.	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA

**Compliance Evaluation Inspection
Raton Water Treatment Plant
NPDES Permit NM0029891
Inspection Date: August 20, 2019
Further Explanations**

INTRODUCTION:

On August 20, 2019, Jennifer Foote of the New Mexico Environment Department (NMED) Surface Water Quality Bureau (SWQB), accompanied by Amy Andrews of the U.S. Environmental Protection Agency (USEPA), conducted a Compliance Evaluation Inspection at the Raton Water Treatment Plant (WTP). The Raton WTP has a design flow discharge capacity of 0.08 MGD (million gallons per day) and is classified as a minor industrial discharger under the Federal Clean Water Act, Section 402, of the National Pollutant Discharge Elimination System (NPDES) permit program. It is assigned NPDES permit number NM0029891. This permit regulates the WTP discharge to an ephemeral arroyo, thence to Raton Creek, thence to Chicorica Creek, thence to the Canadian River in segment 20.6.4.305 of the Canadian River Basin according to the State of New Mexico Standards for Interstate and Intrastate Surface Waters, 20.6.4 NMAC. This segment includes the designated uses of irrigation, marginal warmwater aquatic life, livestock watering, wildlife habitat and primary contact.

The NMED performs a certain number of CEIs for the U.S. Environmental Protection Agency (USEPA), Region VI, under the NPDES permit program, in accordance with the Federal Clean Water Act. USEPA uses these inspections to determine compliance with the NPDES permit program. This inspection report is based on information provided by the permittee's representatives, observations made by the NMED inspector, electronic DMRs, and records and reports kept by the permittee and/or NMED.

INSPECTION DETAILS:

After arriving at the facility, the inspector met with Mr. Anthony Bustos, Filter Plant Superintendent, and presented credentials and explained the purpose of the inspection. Mr. Bustos and Mr. Dan Campbell, General Manager, conducted a tour of the facility and described ongoing and future planned improvements. An exit interview was conducted to present the preliminary findings of the inspection.

TREATMENT SCHEME:

The Raton Water Treatment Plant is a municipal drinking water treatment facility. The plant was built in 1946 and is currently undergoing renovations. The facility is designed for total reuse of its wastewater, but maintains the permit in case an event occurs when they cannot reclaim all the backwash water. The General Manager believes that there hadn't been a discharge from the facility since the 1970's.

The intake water is received from Lake Maloya and/or the Cimarron River. Recently the Cimarron River has been affected by forest fires and is being used less as a water supply. This facility has the ability to treat up to 4 MGD, with the backwash and filter-to-waste water flows generating a flow of approximately 0.08 MGD. The raw water is treated with coagulation, flocculation, sedimentation, filtration and disinfection. Raw water is fed to a large holding tank. The water is then pumped into the facility where aluminum chloride and a polymer are injected. It flows through two large basins where the floc grows in size. The water is then fed into rectangular clarifiers where the floc settles out. After clarification, the water flows into filtration units and then is sent out for distribution. Major treatment operations for the WTP have an alarm system and automatic call out system.

Filter backwash sludge is managed by sending flows from the backwash system into a 660,000 gallon settling basin below the plant by turning a manual valve. The backwash is currently flushed about four times a year and is expected to be reduced to twice a year after renovations. Water from this pond is pumped back up to the holding tanks after the waste has settled. The backwash flow is metered and a mass balance could be done to help estimate flows out of the pond if it were to overflow. If the pond were to overflow it would breach on the west side, where the slopes of the pond have been armored with rip rap. Stormwater has been diverted around the pond through a culvert.

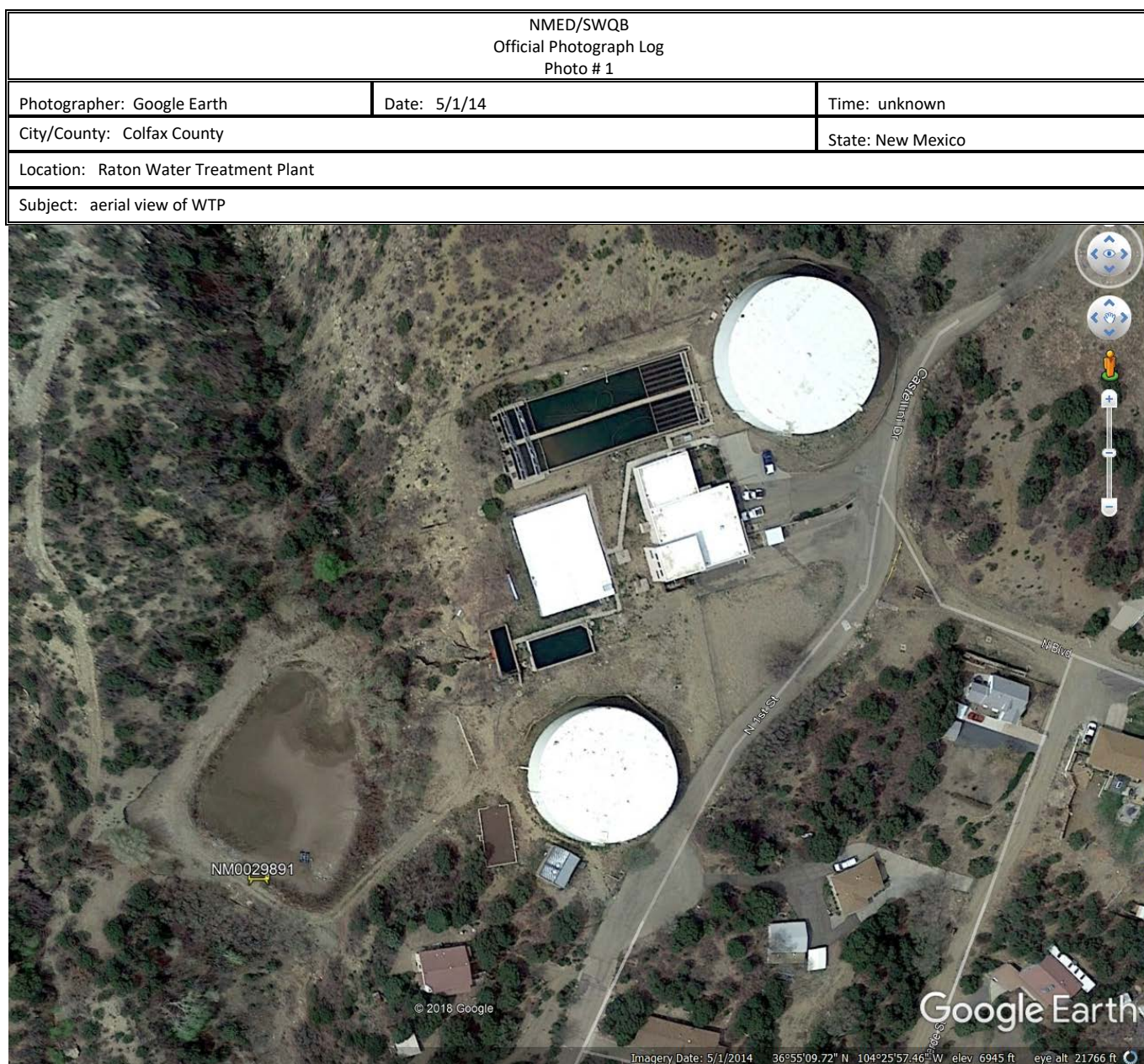
The sludge is periodically removed from the settling basin and may be further dewatered in sludge drying beds prior to transfer of the alum sludge solid to a city owned land-application site.

OBSERVATIONS:

Section D – Self-Monitoring - overall rating of “Satisfactory”

OBSERVATIONS: Since the last inspection, a standard operating procedure (SOP) was established in order to be ready to sample if a discharge event occurs. Chlorine and TSS would be brought to the WWTP Laboratory. Aluminum, gross alpha, tritium and WET testing would be sent to an outside lab. The facility has a cooler onsite with prepared collection bottles and instructions.

Findings: The facility would expect a discharge to only last an hour or so, however additional gallon cubies may be needed for WET testing if the emergency discharge were to occur for several days. Expiration dates for sample bottles with preservative should be monitored and replaced when necessary.



NMED/SWQB Official Photograph Log Photo # 2		
Photographer: Jennifer Foote	Date: 8-20-19	Time: 8:47 am
City/County: Colfax County		State: New Mexico
Location: Raton Water Treatment Plant		
Subject: backwash pond		

